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					dichael S. G		(Depositor's name)
				/ //	March 30		(Signature)
APPLICATION NO.	FILING DATE	FIRS	ST NAMED (NVENTOR		EY DOCKET NO.	(Date)
10/552,236	10/07/2005		etsuya Wa	*3114**		036-0088	CONFIRMATION NO.
TITLE OF INVENTION:	PROCESS FOR PR			BLE LIQUID POLYUR			6297
APPLN. TYPE	SMALL ENTITY	ISSUB I	FEE	PUBLICATION FEE	TOTA	L FEE(S) DUE	DATE DUE
nonprovisional	NO	\$151	0	\$300		\$1810	03/31/2009
EXAMIN	ER	ART UNIT		CLASS-SUBCLASS	-8 3/31/2009	WBELELES 800	00030 122136 10552
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☐ "Fee Address" indicat	cas form PTO/SB/122) ion (or "Fee Address" Ir 22 or more recent) attack required. PRESIDENCE DATA T an assigned is identified forth in 37 CFR 3.11. E gnoe category or categories enclosed: mall entity discount perr	attached. Idication form Idication form Idication form Idication form Idication form Idication of a Idication of this I	(1) the nai attorneys (2) the nai registered 2 registered 2 registered isted, no on the patent will a form is NO (B) RESIDE TOKYO, Journal of Fe A check in Payment b.	ppear on the patent. If a Substitute for filing a STAT APAN Individual Indivi	patent ely, ng as a membe e names of up ents. If no name an assignee is in an assignment. E OR COUNT Corporati is enclosed2038 is attach	dentified below, to	the document has been
a. Applicant claims SM. The Director of the USPTO is above. NOTE: The Issue Fee assignee or other party in into Authorized Signature	MALL ENTITY status. S a requested to apply the and Publication Fee (if	cc 37 CFR 1.27.	lication Fee		ny previously p		e application identified by or agent; or the
Typed or printed name	Michael	S. Gzybowski		Registro	ation No.	32,81	
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ees pursuant to the Consolidated Appropriators Act, 2005 (H.R. 4818) TRANSMIT For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$1,810.00

Complete if Known						
Application Number	10/552,236					
Filing Date	October 7, 2005					
First Named Inventor	Tetsuya WATANABE et al.					
Examiner Name	Sanza McClendon					
Art Unit	1796					
Attorney Docket No.	121036-0088					

METHOD OF PAYME	NT (check a	il that apply)			•					
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Plant	220	110	330	165	140	70				
Reissue	330	165	540	270	170	85				
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2. EXCESS CLAIM FEES	• • • • • • • • • • • • • • • • • • • •	. 10	. •	U	0	0	***************************************			
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4. OTHER FEE(S) Non-English specification,	\$130 600 /	no empli estis.	dia				Fee Paid (\$)			
Other (e.g., late filing surch	ange): Issue	no small entity and Publication	oiscount) • Fees							
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Į	Signature /	Practical Defin Registration No. (Attorney/Agent) 32,816	Telephone	73 4-995- 3110
	Name (Print/Type)		Date	March 30, 2009

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